

Continent Colostomy, New Technique

Authors : Malak Shawky

Abstract : Introduction: Colorectal cancer constitutes about 7% of all cancers. Abdominal perineal resection remains the standard operation against which the results of lesser procedures are measured. Patients and methods : This study included 48 patients presented with pathologically proved carcinoma of the lower third of the rectum and scheduled for abdominal perineal resection with total excision of the mesorectum. They were randomized into two groups as regards the technique of colostomy after abdominal perineal resection. A study group of 24 patients underwent this new technique in which the rectus abdominis muscle was used for wrapping the distal end of the colon in a 270 degrees and fixing the muscle to the anterior rectus sheath. A control group of 24 patients who underwent colostomy by the classical transrectal technique. Results : The use of a distal rectus muscle sling surrounding the stoma by 270 degrees achieved continence for solid stool in 12 patients of the study group compared to no patients in control group. 10 patients were able to avoid wearing colostomy appliance by day but still have to wear them by night, Patients have to wear the colostomy bags when they had diarrhea especially when they were receiving chemotherapy. One case had post operative wound infection and gaping managed by debridement and secondary sutures without the need to remove the mesh. Manometric studies for both control and study group showed : The average resting pressure was 40 mmHg in the study group compared to 15 mmHg in the control group. Conclusion : Continent Colostomy is a promising tool for quality of life for abdominal perineal resection patients and a hope of normal life for them.

Keywords : colostomy, rectum, resection, rectus

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